

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEASTERN MICHIGAN		<i>Policy and Procedure</i>	
Department Performance Improvement		# of Pages: 8	
Policy Name PERFORMANCE IMPROVEMENT		Type of Policy: [] WCHO [x] Affiliation [] Network	
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Administrative/Board of Directors Sign Off			
Administrative Signature:			Date:
Board of Directors Signature:			Date:

I. PURPOSE

To establish and ensure an integrated affiliation wide Performance Improvement (PI) system is implemented and operating in accordance with applicable standards of the PIHP and CSSN within a defined scope for the Community Mental Health Partnership of Southeastern Michigan (CMHPSM).

To ensure the following values are upheld in improvement processes based on the approved PI Program Description/Plan that include but are not limited to:

- Continuous qualitative and quantitative information is used.
- Organizational systems learning
- Alignment with strategic planning
- Stakeholder (consumers, family members, providers, staff) involvement
- Replication of Successes by fostering and enabling affiliation and local improvements.

To ensure the following outcomes are being addressed:

- The reductions of risk factors in service delivery.
- The identification and resolution of specific service delivery and organizational opportunities for improvement.
- Evaluation of specific program components in relation to established measures with evidence of program modifications, redesign or improvement based upon data,
- Evidence of employee, consumer and community stakeholder involvement in needs assessment, service planning and problem identification and resolutions.
- Evidence of service improvements and enhancements including innovative program designs based upon results of quality improvement activities.

II. APPLICATION

This policy applies to the Prepaid Inpatient Health Plan (PIHP), Comprehensive Specialty Services Network (CSSN), CSSN look-a-likes, and all network providers of specialty support services.

III. DEFINITIONS

CMHPSM: Community Mental Health Partnership of Southeast Michigan, an affiliation of community mental health boards and the PIHP that provides services to Medicaid and Indigent consumers with developmental disabilities, mental illnesses and substance abuse.

CSSN: Comprehensive Specialty Services Network that has a board of directors and delivers Medicaid and indigent services to consumers either directly operated or through a network of contract providers.

CSSN Look-a-Like: A public entity that has a publicly appointed board of directors or has publicly appointed officials that delivers Medicaid and indigent services and is accredited.

PIHP: Prepaid Inpatient Health Plan is the oversight entity of Medicaid services within the CMHPSM for Mental Health and Substance Abuse Services.

Performance Improvement System: The PI System is the overarching entity within the CMHSP that is responsible for addressing, implementing and resolving Performance Improvement, Performance Assurance and Performance Planning initiatives.

Performance Improvement Process: A Performance Improvement process is a systematic way of addressing improvement opportunities that involve the use of soft (facilitation techniques, problem solving processes) and hard (data analysis, statistical tests) skills to understand, recommend and implement change.

Shared Governance: The means by which the directors and board members from each of the counties within the CMHPSM have input and authority over the implementation of improvement efforts for the CMHPSM.

Stakeholders: Consumers, family members, community members, funders and staff along with others that have an impact on and are impacted by the decisions made within the CMHPSM.

IV. POLICY

Authority:

The CMHPSM integrated PI system is overseen by a shared governance model that includes the CSSN and CSSN look-a-like directors with the leadership responsibility. The PIHP executive director holds the overall responsibility for this PI system while each affiliate director assures implementation within their agency and for involving leadership at the affiliate level. Performance Improvement initiatives will be prioritized using decision making criteria based on issues that are of high risk, high cost and problem prone areas and that are in alignment with the strategic plan.

This integrated structure is led by the CMHPSM’s Performance Improvement Administrator. The PI Administrator is responsible for the implementation of this policy and ensuring the PI system operates in accordance with the PI Program Description/Plan. The PI system is constructed of a PI committee, CSSN and CSSN look-a-like representation, standing committees, workgroups, and Ad Hoc PI teams.

Scope:

The PI system for the CMHPSM that includes each CSSN and CSSN look-a-like is responsible for the oversight and ensuring the quality of care of consumers. The PI system shall address any issue in need of performance improvement, performance assurance and performance planning that may arise and use improvement processes including but not limited to root cause analysis, plan-do-check-act and problem solving.

The CMHPSM has a value that uncovering root causes is the most effective means to ensure lasting systemic change. When the need for such change has been identified, the use of qualitative and quantitative data will be reviewed to identify areas that need improvement. These improvement efforts will ensure the success of high quality services are delivered across the entire CMHPSM.

Standards:

- A. The PI system shall ensure that the CMHPSM and local affiliates provide leadership for the implementation of improvement efforts.
- B. The PI system shall adhere to all external and internal standards of governance, management and direct/support services.

- C. The PI system shall be regularly monitored and evaluated to ensure quality components are being implemented along with any external or internal standards or regulation revisions are made.
- D. The PI system program description/plan shall be approved annually by the PIHP board and be adopted by the CSSN board.
- E. The PI system shall operate within the annually approved PI program description/plan.
- F. The PI system is a confidential peer review system where aggregate information is shared that is not subject to the Freedom of Information Act (FOIA) or other forms of disclosure.
- G. The PI system shall be organized through an integrated Performance Improvement Committee structure with standing committees, workgroups or Ad Hoc PI teams that regularly report to the PI Committee.
- H. The PI system oversight is the responsibility of an identified Performance Improvement Administrator with overall responsibility by the PIHP executive director.
- I. The PI system shall include consumer and/or family representation.
- J. The PI system shall include network provider representation.
- K. The PI system shall have medical director consultation to assist the PI committee in addressing any medically significant performance improvements.
- L. The PI system shall ensure that the improvement efforts are prioritized using decision making criteria and are aligned with the strategic plan.
- M. The PI system is responsible for approving, collecting, analyzing and monitoring organizational PI indicators to identify trends and reduce risk.
- N. The PI system shall perform qualitative and quantitative improvement processes that obtain input from stakeholders to ensure high quality change efforts take place.
- O. The PI system shall provide leadership, coordinate, collaborate, and or participate in CMHPSM or affiliate programs, boards and stakeholders improvement efforts for the purpose of building upon strengths and reducing the frequency of improvement opportunities.
- P. The PI system shall communicate the results of improvement efforts made to necessary stakeholders.

- Q. The PI system shall obtain PI reports and data on time per the agreed upon reporting schedule and in the agreed upon format.
- R. All CMHPSM network providers shall report all PI data at the specified timeframe per the signed contract with the applicable CMHPSM affiliate.
- S. The CMHPSM affiliate shall withhold payment as outlined in signed contract to a CMHPSM affiliate and or CMHPSM network provider should PI reports and data not be submitted within the necessary timeframe.
- T. All CMHPSM network providers must operate within an approved performance improvement system as defined in the signed contract.

V. EXHIBITS

- A. CMHPSM PI Program Description/Plan
- B. CMHPSM PI Reporting Calendar
- C. CMHPSM Affiliate Reporting Form
- D. CMHPSM Committee/Workgroup/Ad Hoc PI Team Reporting Form

VI. REFERENCES

- A. JCAHO 2006-2007 Behavioral Health PI 1.10-3.20
- B. BBA 438.206, 438.236, 438.240,
- C. MDCH Contract Attachment (10-1-02) 6.7.1.1

VII. PROCEDURES

<u>WHO</u>	<u>DOES WHAT</u>
PI Committee	<ol style="list-style-type: none"> 1. Approves and monitors the functions/ indicators and information for the PI system as described in the PI system Program Description/Plan 2. Assigns improvement activities to the appropriate standing committee, workgroup, local affiliate or create an Ad Hoc PI team as needed to address areas in need of improvement. 3. Approves Committee/Workgroup/local affiliate/PI Ad Hoc Teams charge.

WHO

DOES WHAT

PI Administrator

4. Reviews and provides input on periodic reports to the Affiliation Executive Committee and the regional subcommittee of the PIHP and the full PIHP board.
5. Assists in CMHPSM strategic planning.
1. Facilitates the PI Committee meetings.
2. Communicates necessary information across the CMHPSM.
3. Convenes Ad Hoc PI Teams and Leads Projects.
4. Delegates projects to applicable standing committees and workgroups.
5. Creates and Revises policies and procedures.
6. Establishes, Maintains and Adheres to a reporting schedule,
7. Generates periodic PI reports.
8. Reports PI system initiatives to the Affiliation Executive Committee, the Regional Subcommittee of the PIHP Board and the full PIHP board.

Standing Committees, workgroups, local affiliates and Ad Hoc PI teams

1. Responsible for aligning work plan and functions to the CMHPSM strategic plan.
2. Use PI processes to implement functions and improvement efforts.
3. Local affiliates use the PI processes to embed improvement efforts across the whole organization down to direct line staff.
4. Report periodically based on the reporting schedule and format to the PI Committee

WHO

DOES WHAT

the work plan functions and indicators of performance and improvement activities.

	<ol style="list-style-type: none">5. Make recommendations to the PI committee for implementing PI processes to address areas needing improvement.6. Responsible for relaying information to and from committee, workgroup, or Ad Hoc Team.
PI Committee Members	<ol style="list-style-type: none">1. Provide input and feedback on reports provided to the PI committee based on the roles of the members.
PI Coordinator of CSSN or CSSN look-a-like	<ol style="list-style-type: none">1. Provide the PI committee periodic reports via the reporting schedule and format.2. Make recommendations to the PI committee for implementing PI processes to address areas needing improvement.3. Responsible for relaying information to and from individual CSSN or CSSN look-a-like.4. Convenes or ensures that Ad Hoc PI teams are constituted per a PI committee recommendation.
PIHP Medical Director	<ol style="list-style-type: none">1. Provide input as needed prior to the approval of that annual PI program description/plan.2. Give input on any medically related performance improvement activities.
Affiliation Executive Committee	<ol style="list-style-type: none">1. Provide leadership across the CMHPSM and individual CSSN or CSSN look-a-like the value and principles of the PI system.2. Reviews and provides input/feedback on the annual PI program description/plan.

WHO

DOES WHAT

CSSN and CSSN look-a-like Management Teams	<ol style="list-style-type: none">3. Reviews and provides input/feedback on periodic PI reports.4. Approves the PI reports prior to being presented to the Regional Subcommittee of the PIHP board.
Regional Subcommittee of the PIHP Board.	<ol style="list-style-type: none">1. Receives and reviews reports and enacts on any PI related issues as needed.
PIHP Board	<ol style="list-style-type: none">1. Provide input and feedback to the Annual PI Program description/plan and periodic reports.2. Approves the annual PI program description/plan and periodic reports.
CSSN Board	<ol style="list-style-type: none">1. Gives final approval of the PI program description/plan.
	<ol style="list-style-type: none">1. Adopts the affiliation approved PI program description/plan.